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Scripted Performances? Local Readings of “Global” Health and Safety Standards (The Apparel Sector in Sri Lanka)

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Abstract

Ensuring a healthy working environment in the apparel sector is advocated by various multi-stakeholder initiatives and retailers because of apparent concerns for the health and welfare of workers. As an ‘ethically sourced’ supplier in the global garment industry, the Sri Lankan industry has by and large taken great efforts to improve the provision of safety and hygiene to enhance worker welfare. The physical provisos and built environments with regard to health and safety issues are superlatively impressive in many Sri Lankan factories. Yet ethnographic fieldwork suggests that upholding this ethical code is messily enforced, with a lower prioritization of worker welfare. Consequently, in promoting ‘global’ health and safety standards, the lack of attention to existing social hierarchies and local context results in an absence of genuine commitment to labour rights – even where working conditions may seem superlatively impressive. Local enforcement of the health and safety code as it transmits across global spaces then can not be separated from inequities embedded in uneven development processes.

Keywords

apparel sector, ethical codes, health and safety, Labour Geography

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(The Apparel Sector in Sri Lanka)***

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ABSTRACT

Ensuring a healthy working environment in the apparel sector is advocated by various multi-stakeholder initiatives and retailers because of apparent concerns for the health and welfare of workers. As an ‘ethically sourced’ supplier in the global garment industry, the Sri Lankan industry has by and large taken great efforts to improve the provision of safety and hygiene to enhance worker welfare. The physical provisos and built environments with regard to health and safety issues are superlatively impressive in many Sri Lankan factories. Yet ethnographic fieldwork suggests that upholding this ethical code is messily enforced, with a lower prioritization of worker welfare. Consequently, in promoting ‘global’ health and safety standards, the lack of attention to existing social hierarchies and local context results in an absence of genuine commitment to labour rights – even where working conditions may seem superlatively impressive. Local enforcement of the health and safety code as it transmits across global spaces then can not be separated from inequities embedded in uneven development processes.

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Introduction

Safe working places are a cornerstone for enabling worker welfare in factory settings. Occupational health and safety (OHS) is perceived as most ‘straightforward’ for implementation and where forward movement has been made under voluntary global governance regimes (Brown 2009, Barrientos and Smith 2007). OHS, however, is a disputed arena as it essentially encapsulates the perennial conflict between state, capital and labour. The strength of labour movements, collective worker participation, dominance of bio-medical approaches, and worker awareness all determine and shape the efficacy of OHS in factory settings (Brown 2009, 2011; Elling 1989; O’Rourke 2000). They shed light on the varied ways workers experience factory settings, pointing to the continued

work that needs to be done. Yet, our awareness of the ways in which both management and workers interpret and implement OHS measures as they cross continents and countries is limited. Elling (1989) says that this lacuna makes imperative the need for thick description so as 'to expose the ways in which cultural hegemony operates to undercut and short change (OHS) and the workers' exposure to occupational hazards' (1989: 1179-1181). Ethnography, and participant observation in particular, enlivens how labour negotiates everyday workplaces (Armbruster 2008, Brooks 2010, Prentice 2010).

Ethical codes are an important instrument of global governance in the garment trade, where OHS issues have evolved rapidly because of their auditable nature (Barrientos and Smith 2007, Clean Clothes Campaign 2005). However, growing evidence suggests that problems abound in OHS systems in global supply chains. For example, factories generally lack on-site OHS professionals, and there have been significant challenges to the implementation and effectiveness of monitoring mechanisms (Brown 2009, Miller 2011, O'Rourke 2000). Consequently, factory fires and collapses with devastating and deadly consequences for workers continue to plague the industry, especially in Bangladesh and Pakistan (Brown 2011, 2012; Day 2010; Miller 2009 2011). In contrast, neighbouring Sri Lanka has evaded this negative publicity, and the media tends to portray the Sri Lankan apparel industry as an 'ethical' supplier that takes global governance regimes seriously – an image that the industry has strategically cultivated (Karp 1999, O'Leary 2009). How labour fares in these settings are taken for granted as resoundingly positive.

De Neve (2009), however, rightly reminds us that there is also a politics of compliance – in so far as 'ethical corporate regulations are shaped by and constitutive of power relations in the global market' (2009: 63). His interventions underscore the point that the neo-liberal global economy is 'rooted in, and shaped by, particular social practices, cultural mores and institutional frameworks', which result in erratic distinctions in myriad spatial locations (Wills 1999: 446). This particular grounding, as labour geographers have suggested, matters for worker agency but also requires appreciating their spatial choices within 'capitalism's unevenly developed geography' (Herod 2012: 21, Castree 2007). Moreover, Castree (2007) notes the need to be attentive to the social and cultural tapestry of workers' social lives, signalling that how workers live outside workplaces also matters for labour geography. My contention is that these socio-cultural spheres are never neatly left behind when labour enters workplaces. As I show in this paper, socio-cultural politics within factory sites are also an important lens through which to appreciate the workings of labour agency. Hence, unravelling how workers encounter corporate codes in the global garment industry requires considering not simply how capital embeds locally (Herod 2012, Mezzadri 2012), but also how labour negotiates industrial relations.

This research focuses on how global governance circulates, or takes on a life of its own as it travels worldwide and is put into practice in local settings in one area of ethical codes, i.e. health and safety. By zooming in on the realm of health and safety, this paper brings to the fore discussions about how global governance regimes are mutually constituted by local contexts. Using Sri Lanka's apparel sector as a case study, this paper aims to show the divergent ways in which health and safety measures constructed in the Global North are implemented in factory settings in the Global South.¹ The paper illustrates how OHS measures cannot be separated out from uneven development

processes. Instead, I argue that global efforts to improve the health and safety of workers and create healthy work settings needs to incorporate place and space through a greater understanding of how the relationship between global governance and uneven development is co-constituted. This focus enables a more situated analysis of capital and labour relations, positioning them within wider socio-cultural relations and uneven development processes (Carswell and De Neve 2013, Herod 2012). It also fulfils a lacuna identified by Herod (2012) in labour geography regarding the absence of empirical study of outside of industrial capitalist societies.

The Sri Lankan Sociality

Sri Lanka in the late 1970s embarked on open trade policies, with Sri Lanka's first free trade zone set up in 1978 (Gunawardana 2007: 80). The industry has witnessed phenomenal growth since the 1970s, with the garment sector accounting for over 45% of exports by 2005 and employing nearly 275,000 workers (Sluiter 2009: 53). Although the phase-out of World Trade Organization quotas in 2005, the global recession of 2008, and the removal of GSP+ trade preferences from the EU in 2010 created oscillations within the industry, as of 2008 it remains a significant source of employment for workers with the sector employing 49.9 percent of the workforce according to the Census and Statistics data (Ruwanpura 2012). The 200 Garment Factory Programme of 1992 lies at the helm of current employment trends, because it was implemented to redress rural unemployment and attend to latent nationalist anxieties (Lynch 2007). While the cultural politics of Sri Lanka's garment industry workers have been subject to scholarly scrutiny (Lynch 2007, Hewamanne 2008), our awareness of labour-management responses to global governance initiatives is limited. This is unlike neighbouring countries in South Asia, where there is coverage on the politics of global labour standards and compliance in the apparel industry (De Neve 2009, Mezzadri 2012, Miller 2012). Because there are limited studies about how the garment sector in Sri Lanka has responded to the demands of consumers and retailers to provide safe and hygienic working environments, this paper seeks to address a significant gap.

Sri Lanka's ability to evade negative media scandals is often attributed to the high health and education levels of its workforce, such that the social development of the country places a degree of responsibility on the managers to be attentive to worker welfare (Sluiter 2009). In more recent times, in response to ethical trade efforts promoted via consumer campaigns and multi-stakeholder initiatives, the Sri Lankan apparel industry has postured itself as an ethical sourcing destination. The apparel sector thus has taken great strides to ensure that the built environment and landscapes of factories adhere and aspire to health and safety standards required of them. Some factories set the industrial standard not just for Sri Lanka, but for South Asia and the world – and in this regard, surpass industrial expectations by leaps and bounds (O'Leary 2009).

Notwithstanding these laudable efforts, worker health in the industry is not without blemish. Attanapola (2004) explored the health status of women workers in the largest Free Trade Zone (FTZ) in Sri Lanka through qualitative fieldwork and life histories. She points to the health impacts of changing gender roles and practices, which include muscular-skeletal disorders and recurrent headaches, noting how workers normalize illness and poor health – which constrains their ability to

seek appropriate medical treatment (2004: 2307).² Similarly, Hewamanne's (2008) careful analysis of factory life in Sri Lanka points to the ways in which the medical care offered within the workplace is deployed as an instrument of 'disciplining agents who control "unnecessary" disruptions to the assembly-line work' (2008: 115; see also Lynch 2007). Because workers are under the watchful eye of the penalizing role of medical power within factory settings, illness gets normalized and working while ill is commonplace. More importantly, her work hints at how certain OHS standards are neglected either because of worker discomfort or management leniency. For instance, when workers are using toxic glues, they are unlikely to use protective covering because they perceive it as a hindrance to easy breathing. Management are equally at fault because they turn a blind eye (ibid: 54). Occupational hazards are potentially created not necessarily through wilful neglect but also through the ways in which management and workers prioritize health and safety issues themselves. Even though there is a commitment backed up with initiatives in place by the Sri Lankan apparel industry, the need to pay attention to persisting aberrations is evident. These gaps present an opportunity to better understand what is at stake in the disjuncture between global OHS discourses and its local practices – and its consequent implications for labour conditions, rights and agency. These interventions also highlight how these efforts cannot be separated from inequities embedded in the global economy and macro processes of dominance and subordination.

Fieldwork in a Sri Lankan Setting

The research for this article springs from a three-year Economic and Social Research Council (ESRC) project on how labour responds to ethical trading codes at sites of production. Initial fieldwork for the research included interviewing 25 senior and mid-ranking managers drawn from buying offices and producers in the apparel trade of Sri Lanka (Ruwanpura and Wrigley 2011). These initial interviews lead to serendipitous connections, where two senior factory managers expressed willingness to having us do extended ethnography in their factory. Since global multi-stakeholder initiatives have been critical of their lack of openness to labour rights organizations, they reasoned that being open to a seemingly trustworthy and independent researcher would work to their benefit. Their only request was that I maintain anonymity of the supplier names and details.

The two factories I was based at produced apparel for the export markets, primarily in the United Kingdom and USA, with the variety of garments made ranging from lingerie to outerwear. Their buyers included high Street brands, such as Marks and Spencer, Debenhams, BHS, Tesco, American Eagle, George, and Matalan, as well as more exclusive retailers such as Eddie Bauer, Calvin Klein, Tommy Hilfiger, Levi Strauss, and Lily Pulitzer. Given this retail clientele, both factories were regularly audited by local commercial auditing bodies such as the Ethical Trading Initiative (ETI), Fair Labour Association (FLA), WRAP or retailer-commissioned auditors.

This paper is based on seven and a half months of fieldwork between early August 2009 and end February 2010. During this time, I conducted participant observation and in-depth interviews with 60 factory workers at these two factories. The factories employed 1,500 and 800 workers, respectively; hence are relatively large production facilities. In order to acquaint and familiarize myself with the workers, I visited the two factories daily during this time period. Prior to this, a

research assistant who came on board at the start of April 2009 was embedded at the two research sites to create an enabling context for long-term (two year) interactions with workers. Since both of us were women and of a similar age group as the bulk of women workers, who were in their 20s or 30s, and were proficient in the vernacular, after two to three weeks of routine visits we were able to break the ice and build an excellent rapport.³ We were always aware that our class location and positioning was different. However, like Lynch (2007), as a feminist scholar I ‘was attentive to the myriad power dynamics within the factories of supervisors, workers and managers, and between myself and all of them’ (2007: 15). My positionality meant that I negotiated the data gathering conscientiously and delicately.

Moreover, once I had developed a particular rapport and familiarity with workers, alongside my regular placement at the two factories, I also did day or two-day visits to a range of other factories in the apparel sector. These visits were to medium and large-sized factories producing for both high and low-end retailers, which offered me an informed sense of the conditions and practices at factories across the country.

My time at the two factories meant the opportunity to observe and sometimes participate in the daily working realities of factory life. Using participant-observation, I can also speak to changes and events over a period of time. The dissonance between purported goals and practices of OHS are unlikely to be captured through management and worker interviews unless a catastrophic crisis has occurred (Brown 2011, Miller 2011). Hence, thick description helps illustrate the everyday factory setting in the realm of OHS. This is supplemented by accounts given by workers to consolidate the multiple, seemingly incongruous ways in which workers perceive and negotiate occupational hazards.

Compliant Factories of Sri Lanka

Against a backdrop of exporting to the global market as an ‘ethical’ supplier, adherence to ethical codes includes providing workers with a working environment which is safe and hygienic. All managers noted the many accomplishments the Sri Lankan industry has made in this regard (Ruwanpura and Wrigley 2011), and constant improvements remain an aspiration of local management. While each corporate or multi-stake initiative has its own points of emphasis and orientation, the ETI base code suggests that safe working places are a priority for clothing retailers. By instituting these measures, supplier factories are supposed to protect worker welfare. The factories in this study, likewise, had taken necessary steps to create visibly pleasant and purpose-built plants, paying attention to health and safety requirements. The allocation of outdoor space for gathering in case of fire, fire extinguishers allocated at appropriate locations, fire exits, ample glass windows, skylights and doors for proper light, air circulations and ventilation, air-conditioning, clean and sufficient toilet facilities, and needle rooms are provisions provided to create a safe working environment. All workers are given training in health and safety during their induction period, usually lasting between two to three weeks.⁴

Management at both plants claim to record all minor and major incidents that take place, because it offers auditors a paper trail to follow when conducting inspections.⁵ In Factory X this recording takes place through the medical centre, with three nurses – two women and one man –

held responsible for noting injuries, recurrent ailments, or ill health. A medical doctor also visits weekly to meet workers who have ongoing health issues. Workers see the medical practitioners through appointments, although urgent incidents are seen the same day. The records kept serve as part of the audit trail. Additionally, there is an in-house counsellor who workers can access routinely, with both personal and medical-related problems that affect their ability and capacity to work.⁶

Factory Y went about this audit-driven promotion of a safe working environment differently. Every production line is placed with a First-Aid Cross with dates of the month, which gets colour coded – green for no incident, orange for a minor incident, and red for a major incident – on a daily basis by the line supervisor or the health and welfare worker representative for the production zone. These First-Aid Crosses are then filed away for inspection and further interrogation during appraisals; the mechanics of the auditing process with a paper trail are duly in place.

Procedural systems in place signal the commitment on the part of factories to comply and uphold health and safety. But what of the ground level realities? How do and which OHS measures get translated and implemented? The next section offer vignettes of two incidents which shed light on grounded dynamics shaped by socio-economic inequities, class relations and gendered positions.

Unrecorded, But Supported (Just About)

Karthika is a 39-year-old woman worker, who has been in the trade for the past decade, and her employment experience spans working abroad in the Middle East. She is unmarried – a rarity for her age group and cohort – and was acutely aware of all codes, another rarity. Her knowledge stems from having a niece who had conducted a pilot audit for a local organization, and partially because she had been working in the sector for a decade. Her role on the line was that of a jumper; namely, a multi-skilled worker who is called upon to attend to diverse tasks, depending upon the needs of the line. Because of this, at no time did I see her more than a week on the same line, operation, or task; she was constantly moving around – similar to other jumpers. All jumpers had the necessary training for the various activities during the production process, positioning them at a higher pay scale and position in the ladder than workers doing single-task operations. Some of these skills were obtained on the job through years of work. Other tasks – using the snap-button attach, button-attach, button-hole, key-hole, and rivet attach machines – required formal training and a licensed certificate.

I got to know Karthika during my initial days at Factory Y. She hailed me during my many rounds of ambling along the lines and started talking with me, inquiring about my presence there, the nature of the research, and so forth. While she is someone I had initially wanted to carry a semi-structured interview with during my fieldwork, for one reason or the other this never happened. This, however, did not prevent me having lengthy conversations with Karthika both inside and outside the factory setting.

One day in early October 2009, my research assistant (RA) called to inform me that Karthika had been taken to hospital because of a workplace injury. She let me know that her finger had been badly injured and because her bleeding had not stopped they had taken her to the local state hospital. I was spending the day at Factory X and was heading to Factory Y,⁷ where the incident

had taken place, the next day. I suggested to the RA that she touch base with Karthika and make arrangements to visit her in hospital.

The next day, when I visited Factory Y, I was curious to see what arrangements were made to record the incident in the colour-coded First Aid Cross diagrams. This ought to have been a red-coloured event. I sought out the line that Karthika had been working on the day the injury had happened. Because she is a jumper, it took some investigation. Once I located it, her colleagues narrated how the injury had taken place. Because operating the snap-button machine is deemed risky they stressed how many, although not all, had undergone the necessary training. They also pointed out how having their nails chipped was fairly typical occurrence, which they do not even report to the line supervisor save a quick trip to the medical centre to get a plaster around their nail – and then back to work again. However, they said that Karthika's injury was more serious, as her nail was removed and the bleeding did not stop – even after she was taken to the medical centre. Her friend who had accompanied her to the medical centre said that by the time they arrived Karthika had felt terribly weak and her bleeding was incessant. The nurses, in the absence of a full-time medical doctor, informed the Human Resource office that she needed to go to the hospital. The HR office had transported Karthika to the hospital, where she was accompanied by a Nurse and a junior manager from the HR office. They admitted her into the hospital, ensured that she secured a bed, got her lunch, informed her family, and then left her in the care of the hospital medical staff.⁸

The HR office's involvement in taking all of these steps to ensure that Karthika was appropriately cared for medically might lead one to believe that Factory Y also followed procedures for recording the event. After my conversations with *Karthika's* workmates, I looked around for the First-Aid Cross; it was hanging in its usual place on the line. There was, however, no red marking; for that matter there was not even an orange marking on the First-Aid Cross – just the low-level green marking. This was perplexing, given the management's active role in responding to the incident. When I asked the other workers on the line, some of them said, 'Maybe the production floor manager will make a note of it later on', while another said, 'Sister, they never make note of such accidents. If they think they are at fault, they will offer all the medical attention. Otherwise, they will get us to see the nurse, the wound will be treated by her, and they will put a plaster on our finger. Back to work again! These incidents never get recorded. You can always walk this way for the next few days and see if the marking on the First-Aid Cross has changed'.

True to the word of these workers, no recording of the accident was ever made in the First-Aid Cross put in place for this purpose. Moreover, Karthika mentioned that when she returned from three weeks of medical leave on the recommendation of the hospital, she had been informed by the Human Resources Department that she would not be entitled to paid medical leave and this period would be no-pay leave. She sought informal legal advice and even though she found out that she was legally permitted to paid medical leave, she told me 'There is no point talking to them, they will not heed. Unless I leave the job, there is not much point asking'.

Karthika's experience is not a one-off or an unusual incident. Since that time, two male workers were also injured while using the snap-button machines. Although their injuries were less severe, they had taken 14 days medical leave. In these cases too the factory had given reduced-pay leave: a mere 4 days of paid leave. The two injured men were really upset about this outcome. Their

concern was not only a loss of income but also that it meant disqualification for tri-annual bonuses which are determined by their absence record.⁹ In this way, the management used socio-economic vulnerabilities and power differentials to manipulate workers into deciding either to return to work sooner than advised by medical professionals or to sacrifice their pay, incentives, and/or bonuses.

Brooks (2010) notes the lack of compensation for work-place injuries in a Sino-owned apparel sector of Zambia as ‘...illegal and inhumane actions undertaken to ensure profits would not be depleted (2010: 125)’. Aside from the cost savings of such a human resource policy, I contend that with regards to ethical codes, the HR department also doubly ensures that there is no paper trail of an extended leave period which may look dubious to auditors and signal possible workplace accidents. It thus reduces the likelihood of ‘prying’ and cross-examination by auditors. The lack of offering paid medical leave is contrary to the spirit and letter of Sri Lankan law with regard to mishaps in work environments. Yet management are absolved from further scrutiny because ‘care’ to the workers has been shown. Performing to a script gets inflected with endeavours ‘to create a work environment that (is) intensely personal, paternalistic.... and localized’ (Lynch, 2007: 206). Thus management behaviour is continually scripted with limited space for labour to respond or resist these encroachments. Under the guise of the organizational fix of ethical governance, management is then not without shrewd armoury that continually finds ways to constrain the welfare of workers when it affects their profit margin – and hence labours’ agency is suppressed (Carswell and De Neve 2013, Harvey 2011). This cache of management tactics was not limited to the extraordinary moments of workplace accidents; the everyday labor process was also subject to similar constraints on labor agency, as the account below shows. While it shows that changes sometimes come about accidentally, it also demonstrates that labors’ efforts to make their concerns heard at times yield unanticipated consequences.

From ‘Best’ Practice to Debatable Change

The recurrent image conjured up in our imagination about apparel sector workers is of young, single, women workers between 17-25 years old, toiling away as machine operators. It is a symbol which is in no small part reproduced through the existing academic literature, and in particular to feminist contributions that honed in on young women workers and their lives (Elson and Pearson 1981, Hale and Wills 2005). Rarely do we consider, hear, or think about women workers in the apparel sector who are at different stages of the life cycle and how that affects their capacity to carry out machine work. Indeed Humphries (2011) notes how we need to focus on exceptional moments, since they reveal as much about capitalism as does the norm.

When I began visiting Factory X one thing I noticed was that there were a number of visibly pregnant workers on the production floor. They were, however, not working on the machines; their tasks tended to be assisting the machine operators with numerous tasks, which ranged from trimming and cutting to undoing the damage in stitched clothing items. Coined ‘helpers’, they often were found seated next to a machine operator or as a group of workers undoing a defect in a garment. The assistant production managers, together with the line supervisors, decided which tasks workers were assigned to and to balance the line according to the targets set for the day and week.

I befriended a number of pregnant women at factory X – whose ages ranged from 22 to 34 years. For some women this was their first pregnancy, while for others it was not. Almost all of them unanimously spoke highly of the practices in place at the Factory for protecting their welfare as pregnant women. They appreciated the less strenuous work they were assigned to do as well as getting mid-morning and mid-afternoon breaks of about 30 minutes, which included toilet usage, and not having to do night shifts or overtime at night. Additionally, during the first year of their babies' lives, they were entitled to two hours of nursing time after their return to work. Nitya, a 34-year-old woman expecting her second child, had been working at Factory X for about 8 years. According to her:

'They have always looked after pregnant women workers well and it is much better than other factories that we hear about. From the moment we inform them that we are pregnant, they take us off operating the machines on the production floor. I think this practice came through the previous management policies and practices – they had the interest of the worker at heart. The current management simply follows these rules. I wouldn't have worked here for so long if I felt that my health and safety was at risk when I was pregnant – and last time, I worked through my pregnancy right until the time of delivery. I plan doing the same this time too'.

Nitya was not alone in commending these practices, as similar sentiments were echoed by many other workers.

They were, however, also quick to point out that despite some positive practices, the Factory was less than diligent about giving them the full maternity leave time that they were entitled to. Indeed some of our conversations revolved around them asking me to clarify the laws on it. Chandrika, a 31-year-old expectant with her third child, who was unplanned, once asked me, 'Aney mey (here, please) will you find out for us what maternity leave policies and leave are applicable to us? They tell us different things about our entitlements when it comes to maternity leave. If you can find out for us, it will be a great help – some of us can then speak with the management directly about this'. Once I researched this and gave Chandrika the information, it became apparent that the state's policy maintaining divergent thresholds of maternity leave policies for different groups of workers leads to confusion and uncertainty amongst workers as to their entitlements. The Factory Ordinance Act of 1956 under the Wages Board covers pregnant women workers in the manufacturing sector by offering them 12 weeks (84 days) of maternity leave, but inclusive of Saturdays, Sundays and other Public, Bank and Mercantile holidays. Amendments introduced in 1985 via the Maternity Benefits Ordinance provide two hours of milk time per day afterwards until the child is one year old, unless on-site crèche facilities are provided – in which case a 30 minute feeding time is offered. By contrast, service sector workers, covered by the Shop and Office Act, and public sector workers, covered by the Public Sector Workers Act, have more generous maternity leave policies (see also Brooks 2010).¹⁰

Despite pregnant women workers' unease with unfair maternity laws, reflecting the gendered and class position of apparel labourers, they appreciated the factory policy of taking them off heavy machinery work protected their long-term health and safety. Conversely it meant taking home fewer

wages, because they were no longer eligible for productivity incentive payments associated with operators.¹¹ Lack of income security is a very real pressure for these women and their families. A minority of pregnant women mentioned that they wished they had the option to choose whether to work as operators or take on the less laborious task of being a helper. Inari was a 24-year-old who had found out about her pregnancy around mid-September. We had begun to casually converse from the start of my fieldwork at Factory X and when one day I saw her seated as a helper I was perplexed and inquired why she was doing a different task that day. She shared her news about her pregnancy and then went on to say:

‘I know it is for the best for me to do this work and not be at the machines. But sometimes, I think it would be good for us if the managers and supervisors gave us the chance to decide whether we felt fit to undertake operating tasks or if we should become helpers. We have financial pressures too, which we have to think about. If the management was aware and let us decide, then we have the choice – the way it is now we have to undergo financial stresses. I am saying this, even though I know it is best for me and my baby (and she touches her belly area) to be a helper’.

Since some pregnant women shared sentiments similar to Inari, a few women were hopeful that a request could be taken to the Worker’s Council. Their proposal to management was to give workers an option to be either machine operators or helpers during their pregnancy. This was not the dominant view; yet, it was a perspective and a critical one given their economic insecurities. While it was unclear whether this proposal ever made it to the Worker Council (and via this to the management), before Inari shared her news with me, a ‘*case*’ occurred (in the language of the factory setting) that ultimately signalled the changes to take place.

I walked into the canteen around mid-morning looking for a worker. Coincidentally, a number of pregnant workers were swiftly walking out of the canteen, when a few of them who I was well acquainted with said, ‘Aiyo, miss...can’t stop to chat with you. A case has happened. We will let you know later what happened’. I was intrigued, but because they seemed frazzled I never broached the subject with them on the floor. That evening I spoke with Chandrika, who had previously requested that I make necessary inquiries about their legal entitlements to maternity leave. Her narrative, which was subsequently confirmed by a number of other pregnant workers, is noted below. Other workers talked about the incident for a number of days, because they were bitterly disappointed and annoyed about it.

A group of pregnant women workers had been taking their mid-morning rest when the HR manager had walked in. When he saw them having tea in a near empty canteen, he scolded them for loitering about the canteen without being on the production floor. They were upset and scared by the unexpected scolding, because they were on their 30 minute tiffin break and had not exceeded the stipulated time. Because they were upset, a few of them mentioned that they were going to complain to the HR office and a put a complaint in the suggestion box about the HR manager’s lack of consideration. This episode suggests that gender relations coupled with social hierarchies enabled the manager to rebuke workers erroneously without consequence. As a pregnant worker said to me, ‘He

is a man. He may not know what it is like to walk around with a child in the stomach when you are 8 months pregnant. We don't walk, we waddle – and we do everything slower than is normal. Surely, he must have noticed this with his wife?' Their grievance and annoyance made its way to the HR office, because the next day a meeting was summoned by the Counsellor to convey the HR manager's apologies to the pregnant workers. It had been an irrational and thoughtless moment of rebuke. However, he was under the impression that they were aware of new rules that pregnant workers could only spend 15 minutes in the canteen during their tiffin with the remaining 5 minutes to be used for using the toilets and drinking water. A new rule with a shorter and more regimented rest period was thus introduced in a rather sloppy and oblique fashion.

This alteration of factory rules with regard to pregnant workers was the first of a series of steps in which their health and safety protections were gradually eroded. By the start of January 2010, the HR office decided that newly pregnant workers were to continue their work as machine operators in the first two trimesters. They could request to work as helpers during this time; however, the default position was to continue as operators until their pregnancy was more advanced. From the seventh month onwards, pregnant workers were required to work as helpers to protect the health of mother and baby. When I queried about the rationale for the shift of policy from the HR office, they mentioned that this was a response to complaints by pregnant workers because of the lower monthly salary for helpers. Because they realized the financial stresses these working women underwent and the request had come from the pregnant workers, they felt that this was a correct decision to make. They also quickly pointed out that the pregnant workers could always opt to work as helpers if they wanted to, from the beginning of their pregnancy, but this would no longer be the default position.

Floor-level managers mentioned that the decision was not merely a response to the request made by some pregnant workers; it also coincided with production pressures and meeting targets. Ekanath, a floor level manager, acknowledged that there could be health risks associated with pregnant operators and that their challenge was to weigh this against the production targets. In this way, a request by a segment of pregnant women workers coincided with increased production pressures, resulting in a change of internal policy without due consideration for factory place social hierarchies (De Neve 2001).

By the time I left Sri Lanka after completing my in situ fieldwork, the policy had changed again. Any woman worker who became pregnant would continue as an operator unless they elected not to. Amongst the workers I knew, two recently pregnant young women opted for different options against this new policy. Imani is a 25-year-old who found that she had conceived in early February, while Sayuri, a 22-year-old had found out about her pregnancy in January. While Sayuri opted to work as a helper and communicated her preference for this to the management, Imani made the decision to leave her job because she did not think that it would be good for her to be working as a machine operator while pregnant. When I mentioned to her that she could switch to a helper position, she quipped, 'That is what they say, miss', implying that she did not quite trust their word. I asked Sayuri if she thought her peers would feel comfortable requesting to be a helper like she did. She replied, 'Most often probably not, miss. Not all of us feel comfortable going to the HR to talking to them openly and making requests; added to that Mr. T. comes across as quite strict. I

made the request because my mid-wife at the clinic thought that I would be taking unnecessary risks during my pregnancy if I worked as an operator, especially because I'm thin and anaemic'. Their sentiments suggest that power dynamics between management and workers have made redundant offering 'choices' to pregnant workers, despite the fact that some pregnant workers had previously requested these options.

Is the newly instituted default position of continuing as operators likely to pose medium to long-term health and safety risks to pregnant workers? Some pregnant workers acknowledged the likely health risks and yet recognized that it is because some pregnant workers had given undue emphasis to their economic pressures that the shift in human resource policy had taken place. Offering a choice to pregnant workers is likely to give management the credence on paper that attention is paid to both OHS and the economic imperatives of workers. However, the claim that pregnant workers could continue as operators without it impinging upon their health and welfare is medically debatable. It is medically acknowledged that pregnancy is not an illness but a condition where any woman can continue with her usual work routine so long as her physical state permits her to do so, but this medical advice presupposes that pregnant workers have the latitude to take necessary breaks. During an eight-hour shift pregnant workers ought to be given a break every hour for about 2-3 minutes to walk around, to relax their legs and muscles, use the toilet, and drink plenty of liquids.¹² As an operator on a line or module with set targets, any frequent disruption is unlikely to help the pregnant worker meet incentive targets or for a module to reach its daily and weekly production goals. Whether there was careful attention paid to these realities is unclear, in which case production targets for pregnant workers would have to be drastically reduced in recognition of their health condition. Where pregnant women were aware of the health risks posed by undertaking repeated machinery tasks, whether they would always navigate a power-laden terrain to request for the non-default option to work as a helper is uncertain. What is clear, however, is that there was a gradual shift away from practices which promoted the health of pregnant workers to a less than expedient human resource management decision which is likely to go against the health of pregnant workers. The claim that this change was a response to workers' complaints about the economic hardship of switching to a helper position ignores other possible ways of addressing the problem, such as equalizing pay for pregnant helpers.¹³ Deploying a discourse of 'choices' also ignores the sociality of the workplace politics, through which gendered hierarchies and authority thwart workers' actual perceptions of their options (De Neve 2001, Mezzadri 2012).

Global Efforts, Local Labour Practices

The ways in which global efforts take on a life of their own as they journey worldwide across uneven development spaces and through local settings in one area of ethical codes, i.e. health and safety, is the focus of this research. By investigating shop floor health and safety practices, this paper shows how global governance regimes take on situated meanings in the context of apparel production in Sri Lanka. O'Rourke (2001) already draws our attention to situations in which major labour problems in the realm of health and safety hazards occur and calls for gathering detailed information for building alternative systems. Perhaps as a partial response to this challenge, the Sri

Lankan apparel industry has taken laudable steps to meet OHS requirements. However, the fine-grained ways in which the global and local interact through actually existing compliance practices to shape labor agency are often left out of the analysis. In other words, exploring global-local connections helps unpack the ways in which the global political economy has a bearing on labour agency (Carswell and De Neve 2013, Miller 2011, Wills 1999). This paper shows that the flux engendered by global capitalisms' governance regimes shape labour agency within the factory floor in messy, complex ways. Pregnant workers collectively raised concerns to management and had unexpected success, but they also found that their disquiet does not necessarily yield desired results. Injured workers get the medical care and attention they need, but they are not able to collect the unpaid leave for recuperation that they are entitled to and their injuries are not adequately recorded for auditing purposes. Existing management-labour power dynamics, gender relations and social hierarchies in the workplace suggest that the spaces of rupture in the implementation of ethical codes are continuously constrained by wider social and material relations, in this case the increasing pressures on managers to meet production targets (Brooks 2010, De Neve 2001, Mezzadri 2012). Adopting an ethnographic approach to the study of health and safety allows us to recognize that codes are 'always provisional – never stable, and never fixed' and as 'social products...their meaning becomes realized in specific *places*' (Prentice 2010: 10). This realization of ethical trading codes, however, continues to be informed by considerations of political economy and global capitalism. As processes they are not simply unstable and continuously in flux but also implicated in social hierarchies and cultural mores of places which constrain labour agency.

The paper trail processes and the mechanisms for social auditing with regards to health and safety standards in both factories are well in place with sound articulation of intentions – and sometimes even best practices. Yet the ways in which local realities shape and transform practical responses are not merely shaped by production imperatives and the favourable social and human development context of Sri Lanka; they are also shaped by economic inequities, gender relations and social hierarchies at the workplace (Brooks 2010, De Neve 2001, Mezzadri 2012, Prentice 2010). Workers who had workplace injuries were offered the necessary care, support and were even given 'compassionate' (unpaid) extended leave (see also Lynch 2007); there was, however, neither a trace of the wounds the workers suffered nor were they offered compensated medical leave. Simply care without register. Moral tropes of caring factory employers are then freely used as a distinguishing marker of an ethically sourced destination (Perry et al. 2013). Humphries (2010) notes how 'violence (is) less widespread in factories and workshops where other mechanisms of control were available' for an emergent industrial Britain (2010: 245). Similar sentiments are echoed for contemporary factory life in Sri Lanka (Gunawardana 2007, Hewamanne 2008, Lynch 2007). Similarly, through a simple diktat the HR manager changes protective measures in place to care for pregnant workers with regards to their rest periods within a day. This becomes an incipient step in transforming the health and safety provisions of pregnant workers. Within months the manager proceeds to 'respond' to noises from a group of pregnant women workers – thus apparently taking into account their economic hardship. Nonetheless these adjustments get read by most labourers as a regressive move against the health and safety concerns of pregnant women workers. Standards thus respond to the local realities of production pressures and economic imperatives, and yet such shifts

ought not to prevent us from reading the local for its incongruities too. The HR staff point to the economic hardships of workers as the triggering factor that made them let pregnant workers continue as operators during the initial six-months of the pregnancy – a very ‘local’ concern, if one ignores the economic inequities and the lack of a living wage in the sector. Similarly the HR management neglect the social hierarchies and power dynamics, also local factors, which shape the capacity for pregnant workers to exercise their notional choices of continuing on as a sewing operator or becoming a helper.

Workers initiate and are cognisant of their agency in relation to the multiple geographies intersecting with their working lives, whether it is local labour laws, global governance regimes or social auditing methods. The material conditions and social relations within which they are embedded suggest that they may be resilient and even develop strategies of resistance, but it does not necessarily lead to a reworking of material inequalities which makes them seek out work in the apparel sector (see also Lynch 2007). The absence of a living wage, freedom of association and collective bargaining in the Sri Lankan apparel industry means that the capacity of workers to exercise their collective agency is continuously frustrated (Ruwanpura 2012). Even as there are moments of rupture shedding light on multiple social relations and material conditions, they also reveal the asymmetries between labour and capital. Health and safety standards purport to create spaces for betterment as they navigate across uneven development spaces, yet workers ability to benefit from them remain embedded in a politics of inequity with implications for labour conditions and agency. Observing how contemporary discourse on global governance regimes matter to workers, the evidence is differentiated and patchy as to its successes in making sustained difference to worker welfare. It reminds us that too often tropes of worker empowerment and social justice via voluntary ethical codes remain business speak, which are mobilized without the necessary traction (see also De Neve 2009; Mezzadri 2012; Wills 1999, 2000). Using thick description illustrates how ‘webs of significance’ signalled through the adoption of ethical trade regimes also results in ‘webs of power’ that need disentangling (Geertz 1993). Global governance regimes are then not only negotiable as forms of cultural political life, but also serve to legitimate global capitalism and lead to clever manipulation of inherent inconsistencies within codes for the hidden gain of global capitalism.

Conclusion: Hazardous Endings?

The apparel sector in Sri Lanka is taking multiple steps to move into high value-added and upmarket production processes; one way it does this is by paying attention to the built environment and the safety codes in these spaces. In this paper I have attempted to uncover whether these shifts represent a palpable difference for labourers health and safety. Even in the case of ethically compliant factories, the scrutiny afforded to what these ethical codes mean for labour agency remains an under researched area. Wills (1999) makes the evident point that as old certainties vanish it is important to highlight ‘the interconnections of development in different parts of the world’ where we do not lose sight of the political edge of our analysis (1999: 448). While ethical codes and global governance regimes have a two decade long run in global production systems, the evidence is scanty – at best –

that the agency of labour has found a more gratifying space within which to articulate their bargaining power.

De Neve (2009) notes the politics of compliance leads to the ‘consolidation of the power of standard-setting actors by facilitating the devolution of risks, uncertainty and responsibility to the weaker “partners” in the chain’ (2009: 71). In his work, he shows how this ‘partnerships’ plays out between buyers and suppliers. My fieldwork shifts to another scale to show how labour negotiates the global governance terrain; highlighting that the power dynamics between capital and labour implicated in corporate codes need equal scrutiny too. The codes of reality that emerge in respect of health and safety does illustrate that the cultural hegemony of corporate codes do still continue to short change workers (Elling 1989). Labour geographers point to how labour is a constitutive agent facilitating the spread, breadth and accumulation of global capitalism (Castree 2007, Herod 2012). Yet to understand the ways in which labour agency shapes and is transformed in the process, it is also important to record the disjuncture between the rhetoric and practice of capitals’ latest armoury, global voluntary corporate codes. As ethical codes are deployed, the realities of labour practices at production sites suggest that to rely on an instrument without teeth is to also curtail the potential of labours’ agency. This paper makes a modest attempt at pointing to these gaps in the domain of one code – health and safety standards. It shows that because health and safety codes in practice are embedded socio-culturally and travel across uneven capitalist production spaces, it leads to irregular application, which has implications for labour practices, conditions, and agency.

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NOTES

1. See Humphries (2010) for a historical evaluation of the central import of various types of labour conditions, including in the realm of health and safety, in the spread of capitalism in industrial Britain.

2. Attanapola's fieldwork settings include both apparel and non-apparel industries within the FTZ and she does not distinguish between the type of health problems in the two sectors.
3. Initially the workers were suspicious, cautious or curious about our presence and would inquire whether we were working for the buyers or auditors. However, these concerns were soon assuaged because we visited the factories daily for several weeks, which would never happen in the case of auditors or buyers. The eventual friendships that were built with workers have led the researchers to keep in touch with a good number of workers after the research was completed.
4. While both factories I was based at offered the necessary health and safety training to new workers during their training period, there was variation in the manner in which repeated training for assigned workers took place. There was diligence on the part of one factory about offering the repeated training to workers in situ, while at the other the recurrence of health and safety training to current workers was undertaken via select OHS worker representatives – who in turn were expected to apprise their colleagues of any new knowledge learned.
5. Elsewhere, I have documented the politics of paper trails and auditing mechanisms and what it implies for worker welfare in a specific realm of OHS (Ruwanpura 2013, forthcoming).
6. In contrast to the workers' praise of the medical facilities, their attitude towards the counsellor was by and large ambivalent. Often they noted that they could not trust the counsellor because they felt she was the ears for the management; workers who had accessed her thought the support was of limited use because she simply narrates the management line rather than taking a genuine initiative to resolve their problems. My sense for this rather suspicious view of the counsellor and her role has much to do with cultural factors, where personal problems and issues are dealt with speaking to extended kin and close friends rather than a stranger with whom a rapport is not built. Moreover, somewhat unfortunately the counsellor usually limited herself to her office space – located in the canteen area next to the medical centre – with regular visits to the Human Resource division, and had limited interaction with workers. These factors combined together did not create an enabling context for the Counsellor to develop a trusting relationship with workers.
7. The distance between the two factories was approximately 17 kilometres and while I was boarded near Factory Y, which was about a 20 minute walk, commuting to Factory X required driving to the place as it was about a 30 minute drive through pot-holed roads of rural Sri Lanka.
8. While Karthika was still in hospital, she narrated to me how the management took care of her at the factory and hospital after the accident.
9. More recently, the factory has invested in three new snap button machines with finger guards, where the button is fed into the machine automatically via a button box; all the worker has to do is

to feed buttons into the box. Three snap button machines with finger guards in a factory employing approximately 1,500 workers and about 22 production lines is not a remarkable shift – especially as most bands continue to use the older snap-button machines with health risks to workers.

10. The Shop and Office Act gives 84 working days of maternity leave, excluding Sundays and Public, Bank and Mercantile Holidays and with a half day for each Saturday counting towards the maternity leave period. The Public Sector Workers Act is more generous with 96 working days of maternity leave given. Despite ILO interventions on the discriminatory nature of different thresholds for maternity laws in Sri Lanka, the state has taken little initiative to make necessary amendments and meet international obligations on protecting all women workers alike.

11. The lack of involvement in the production process for them means not getting target-based incentive payments as well as overtime wages for night shift work; during their pregnancy this leads to a much lower wage packet and a reliance only on their basic pay. More often than not when this results in nearly a one-third decline in their average monthly pay packet, the dent on their income and household security becomes an obvious concern.

12. According to information I have obtained from medical doctors, a lack of such breaks is likely to cause numerous medical risks to the pregnant mother and the foetus, including the risks of IUGR (Intra-Uterine Growth Restriction). [My thanks to medical doctors Bhathiya Alagoda, Oliver Morris, and Eashika Knox for explaining the health risks associated with pregnancy and working on sedentary repetitive tasks without regular work stoppages and rest.]

13. This shift, when contextualized against the backdrop of labour practices at other apparel sector factories in Sri Lanka is no different from other factories. In Factory Y, for instance, pregnant workers were expected to work as operators throughout the pregnancy unless they had a medical note advising against such work. Many of the other factories I visited stated that they consider pregnancy part of a ‘natural cycle’ for women workers and is not an illness as such and therefore, the expectation was that they continue as operators unless they (the workers) requested lighter work. Pregnant workers, however, could be distinguished from their cohort because they either wore an arm band or a different coloured scarf denoting their pregnant condition – so that the line supervisors, production assistants or managers could be visually informed. The exception was a large-scale factory, considered a leader in the trade for compliance and a commitment to worker welfare, which got pregnant workers to only do light work throughout their pregnancy.

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BIOGRAPHICAL NOTE

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